TEXAS INSIGHT
HEALTHCARE INTELLIGENCE

Health and Human Services

[Public Health Funding and Policy Committee](#)

August 13, 2025

This summary contains supplemental information from reliable sources where that information provides clarity to the issues being discussed. Power Point tables used in the presentations may also be used in this summary. Names of individuals may be misspelled but every attempt has been made to ensure accuracy. Tables and Text have been used from executive and legislative agencies and departments' presentations and publications.

RESEARCH. ANALYSIS. REPORTING. REAL INSIGHT.

[Public Health Funding and Policy Committee](#) defines what core public health services a local health entity should provide in a county or municipality; evaluates public health in the state and identifies initiatives for areas that need improvement; identifies funding sources available to local health entities; and establishes public health policy priorities.

Committee Roster

Name	Membership Category
Presiding Officer Stephen L. Williams, MEd, MPA	Director of Local Health Entity (large)
Assistant Presiding Officer Philip Huang, MD, MPH	Health Authority
Sharon Melville, MD, MPH	Regional Medical Director
Sharon Whitley	Director of Local Health Entity (medium)
Julie St. John, DrPH, MPH, MA, CHWI	School of Public Health
Jennifer Griffith, DrPH, MPH	School of Public Health
Lisa Dick, RDN, LD	Director of Local Health Entity (small)
Todd Bell, MD	Health Authority
Emilie Prot, DO, MPH	Regional Medical Director

1. Call to Order/Welcome. The meeting was convened by Steven Williams and committee members introduced themselves, both virtually (Theresa Burke, Aurelia Smoltsteig, Jennifer Griffin) and in-person (Lisa Dick, Sharon Whitley, Phil Huang, Steven Williams). A quorum was present.

2. June 11, 2025, Meeting Minutes. The minutes were approved as drafted.

3. Public Health Provider - Charity Care Program Update.
Kaleb Miller presented updates on the Public Health Provider Charity Care Program (PHP CCP). Key reporting periods were outlined for future federal fiscal years (FFY2025–2026) but the handouts were not available.

Cost report trainings are mandatory for both new and returning providers to maintain program eligibility; dates shared for upcoming trainings.
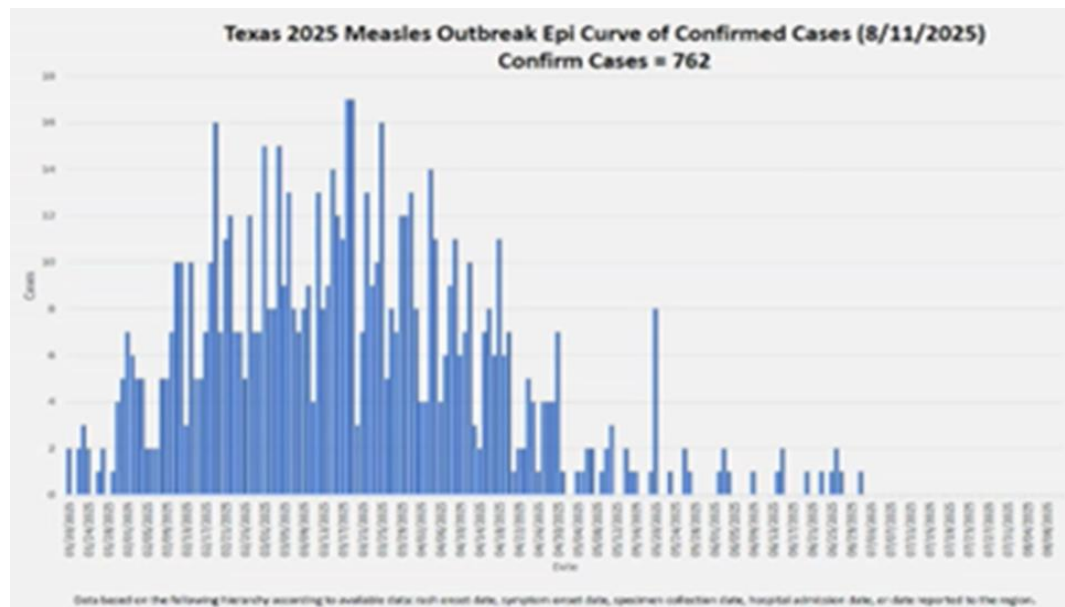
For FFY2024, total settlement before reduction was ~$616.88 million, capped at ~$499.19 million by CMS, resulting in a proportional reduction (80.92%) and ~$302.14 million paid to providers.

5 new local health department/public health districts (LHD/PHD) are expected to submit their first cost reports in FFY2025, with 6 returning LHDs/PHDs and 40 returning behavioral health/community centers.

CMS-approved funding cap applies through 2028, with a potential review and adjustment of limits scheduled for September 1, 2027.

4. Emerging and Infectious Diseases Update.

Measles

Texas 2025 Measles Outbreak – Confirmed Cases (8/11/2025)

Outbreak Cases by County

Home County	Confirmed	% of Total
Andrews	3	0.4%
Atascosa	1	0.1%
Bailey	2	0.3%
Bexar	1	0.1%
Borden	1	0.1%
Brewster	1	0.1%
Brown	1	0.1%
Carson	1	0.1%
Cochran	14	1.8%
Cofin	1	0.1%
Dallam	7	0.9%
Dawson	26	3.4%
Eastland	2	0.3%
Ector	12	1.6%
El Paso	59	7.7%
Erath	1	0.1%
Fannin	4	0.5%
Gaines	414	54.3%
Garza	2	0.3%
Hale	5	0.7%
Hardeman	1	0.1%
Hockley	7	0.9%
Lamar	28	3.7%
Lamb	1	0.1%
Lubbock	52	6.8%
Lynn	2	0.3%
Martin	9	1.2%
McLennan	6	0.8%
Midland	5	0.7%
Parmer	5	0.7%
Potter	1	0.1%
Randall	3	0.4%
Reeves	2	0.3%
Rockwall	1	0.1%
Terry	60	7.9%
Upshur	1	0.1%
Yoakum	20	2.6%
Total	**762**	**100.0%**

Texas 2025 Measles Outbreak Confirm Cases by Age Status
Confirm Cases = 762 (8/11/2025)

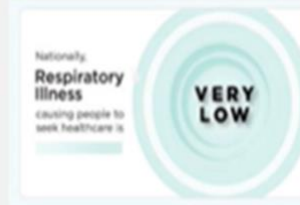| Age Group	Confirmed
0-4 Yrs	225
5-17 Yrs	286
18+ Yrs	247
Pending	4

[Texas announces second death in measles outbreak | Texas DSHS](#)

- 762 confirmed cases reported as of August 11, with cases declining significantly in recent weeks.
- Highest impact noted in school-aged children (5–17 years), with most cases among unvaccinated or unknown vaccination status individuals.
- Two deaths in Texas (a third U.S. death was in New Mexico).
- Geographic spread began in Gaines County, spreading statewide.

Respiratory Illness

National Respiratory Illness

- As of August 8, 2025, the amount of acute respiratory illness causing people to seek health care is at a very low level in the United States.
- COVID-19 activity is increasing in many areas of the country.
- Seasonal influenza activity is low, and RSV activity is very low across the country.

Texas Respiratory Illness Interactive Dashboard
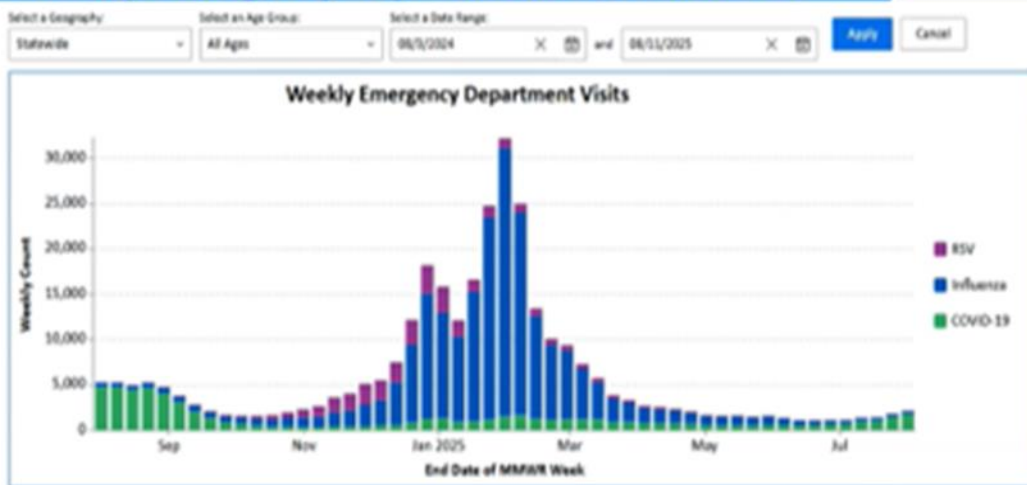
Statewide Snapshot

Percent Change from Previous Week

Week Ending: 08/02/2025

Oct 2023 — Aug 2025

Last Updated on 08/07/2025
Click on respective tiles or scroll down for additional information

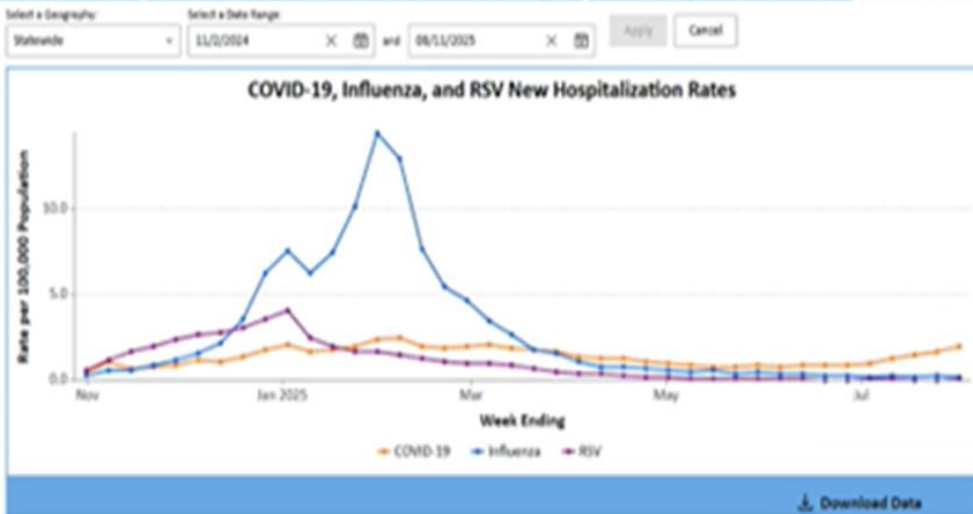| Emergency Department Visits	Hospitalizations	Deaths
Data through 08/02/2025	Data through 08/02/2025	Data through 07/19/2025
COVID-19: ▲ +21.51%	COVID-19: ▲ +17.65%	COVID-19: - 0.00%
Influenza: ▲ +10.33%	Influenza: ▼ -33.33%	Influenza: --
RSV: ▲ +5.90%	RSV: --	RSV: --

Texas Respiratory Illness Interactive Dashboard
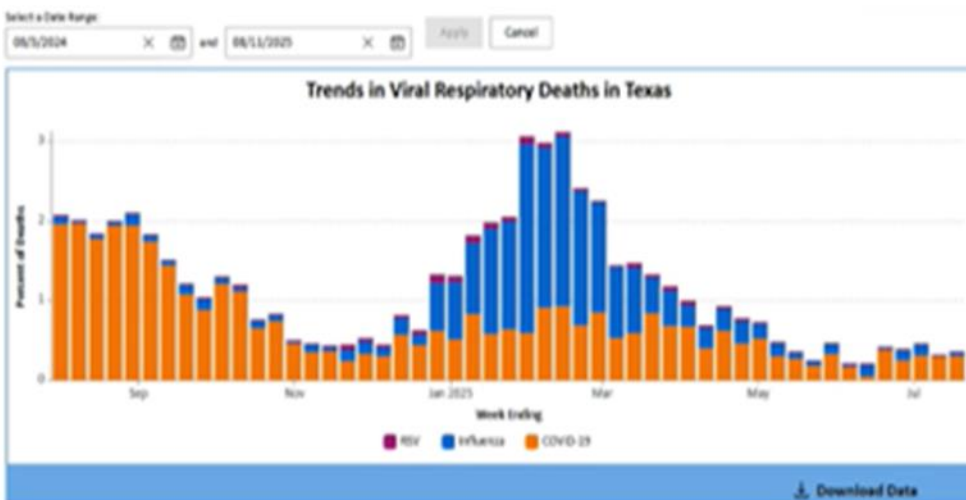## Weekly Emergency Department Visits in Texas

Texas Respiratory Illness Interactive Dashboard
New Hospitalization Rates (COVID-19, Influenza, and RSV) in Texas

Texas Respiratory Illness Interactive Dashboard
Trends in Viral Respiratory Deaths in Texas

[Texas launches new respiratory virus dashboard, report | Texas DSHS](#)

U.S. respiratory illness activity is low; COVID-19 however is increasing somewhat; influenza and RSV remain low presently.

Data sourced from CDC and state dashboards indicates hospital and syndromic surveillance systems are robust post-COVID. There has been a recent uptick seen mainly in COVID-19 cases and hospitalizations, but overall the impact is still mild. COVID-19 continues to account for the majority of respiratory-related deaths (under 8% of total deaths).

5. Data Modernization/Public Health Data Sharing Update

Access is now available to 25 users for line-level Snowflake data, 28 for summarized Tableau dashboard; 50 local health departments contracted, but only about half accessing the data.

Globalscape FTP platform used temporarily for sharing files with personally identifiable information pending Snowflake integration. The Instructions provided for access requests via IM Online single sign-on for Snowflake, Tableau, and Globalscape.

The speaker encouraged departments not yet utilizing these resources to engage and pursue access. Imelda Garcia noted a robotic process automation pilot to streamline getting local data into NEDS, emphasizing IT support and improving state-local data flows.

Immunizations Data Sharing

As of January 31, 2025, data sharing has been live for contracted local health departments. The following local health departments have approved users as of August 7, 2025:

Snowflake Local Health Departments:
- Angelina County and Cities Health Department
- Austin Public Health
- Cherokee County Public Health
- City of Houston Health Department
- Lubbock Public Health
- San Antonio Metropolitan Health District
- Comal County Public Health
- Corsicana-Navarro County Public Health District
- Dallas County Human and Health Services
- Galveston County Health District

- Gregg County Health Department

- Harris County Public Health
- Hidalgo County Health Department
- Marshall Harris County Health District
- Northeast Texas Public Health District
- South Plains Public Health District
- Tarrant County Public Health
- Medina County Health Unit
- Williamson County and Cities Health District

Users: 25

Immunizations Data Sharing

Tableau Local Health Departments:

- Andrews County Health Department
- Angelina County and Cities Health Department
- Austin Public Health
- Cherokee County Public Health
- City of Houston Health Department
- San Antonio Metropolitan Health District
- Collin County Health Care Services
- Comal County Public Health
- Dallas County Health and Human Services
- Gregg County Health Department

- Hidalgo County Health Department
- Marshall Harrison County Health District
- Northeast Texas Public Health District
- Tarrant County Public Health
- Medina County Health Unit
- Williamson County and Cities Health District

Users: 28

Requesting Access to Snowflake/Tableau Roles - External Staff without IAMOnline Accounts

To access Snowflake/Tableau, you will need to use IAMOnline, the main platform for accessing HHS applications.

1. Access the IAMOnline sign-in page and click the "Request account as a non-HHS employee or register organization". Follow the steps to preregister and complete the "Partner User Registration Form".

2. Once your account is approved, an email will be sent with a link to activate your account.

3. After your IAMOnline account is activated, refer to the steps on the next slide (Requesting Access to Snowflakes Roles – External Staff with existing IAMOnline Accounts) to request Snowflake/Tableau data view access.

Need help? If you are having trouble logging into or using IAMOnline, please call the Consolidated Help Desk at 855-435-7181 (7 a.m.-7 p.m. CST, Monday through Friday). Select option 1 for the consolidated help desk and then follow the remaining prompts. Inform the support staff of the issue you are having with IAMOnline and they will assist with resolving the issue or providing a ticket to the appropriate teams.

6. Federal Funding Update

- Notice of grant awards received for HIV prevention, surveillance, and other core programs; most level-funded except for a $1.7 million reduction in the immunizations grant (absorbed without staff cuts by reducing other activities).
- Tuberculosis funding was reduced 20%; local health department contracts cut by 5% starting September 1st, mainly due to rising medication costs and national funding changes.

- Emergency preparedness and epidemiology/lab grants received only partial awards; full amounts are pending further federal updates later in the fall.
- SNAP-Ed nutrition grants ending for nine local departments on September 29th; grant-specific details to be clarified offline as needed.
- DSHS is monitoring the federal budget for future grant announcements and maintains a priority of minimizing impact on service delivery, with advance notification to local partners.
- Discussion included the effect of new national funding formulas and the need to better communicate local impacts and staff/resource losses.

7. Appreciation for Chair Stephen Williams' Service in Texas Public Health. The committee took time to recognize Steven Williams, retiring Director of Houston Health Department and long-serving chair of the committee since 2011.

8. Public Comment. Comments were only made regarding the retiring chair, Stephen Williams

9. Timelines, Next Steps, Announcements, and Future Meetings. The next meeting is November 8, 2025.

Issues identified during the meeting.
- Remind and assist local health departments to participate in upcoming cost report trainings for the Charity Care Program.
- Continue advocacy efforts regarding funding reductions and amplify communication about their impacts to stakeholders.
- Monitor CDC and federal budget communications for further grant award updates and prepare to manage changes with minimal service disruption.
- Follow up on SNAP-Ed grant detail requests.

10. Adjourn/Thank you. There being no further business, the meeting was adjourned.